CABINET FOR HEALTH SERVICES

Department for Public Health

COMMONWEALTH OF KENTUCKY FRANKFORT 40621-0001

MEMORANDUM

TO:

Local Health Department Administrators

District Health Department Directors

Local Health Department Nursing Supervisors
District Health Department Directors of Nursing

FROM:

Pat Rickard, Director Par

Division of Local Health Department Operations

DATE:

November 30, 1998

SUBJECT: Transition to Population-focused Community-based Core Public Health

Please find enclosed the final product of the Woodford County Pilot Project. The "Transitional Model to Population-focused Community-based CORE Public Health" is provided as an "example" of one way to help with the transition from "clinic to community" as the Health Department's primary focus. The Woodford County Health Department has put forth a tremendous effort in developing this transition

Many of you have already begun implementing this or a similar "planning process" for providing community - based health care. Thank you or you input and recommendations.

Some of you have said that the transition model has already been beneficial. It is useful in planning the community-based objectives used in budgeting for next year. A few of you said that is has been helpful in better adjusting to managed care and wished that you'd had it sooner. Perhaps it can be of some use to those of you yet to come up in managed care.

The Public Health Nursing Branch will be available to work with any of you in your transition "back into the community". The attached Team Assignment outline and map indicates the specific Public Health Nurse who would be available to your area for specific purposes. Of course, any of the nurses will be happy to work with you and help address any needs that you may have.

The Division of Local Health Departments Operations is working very closely with all other Divisions within the Department for Public Health. Collaboration between Divisions and with all Health Departments is absolutely essential. The third attachment, "Public Health is Helping Everyone to be Healthy!" points out just a few of the many ways it takes all of us to get the job done. Feel free to use this information sheet to promote awareness of "Public Health" in your Community.

Please let us know how we may be of assistance. The future of Public Health involves us all.

cc: Division Directors
Branch Managers
Section Supervisors
Professional Consultants



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TRANSITION MODEL TO POPULATION - FOCUSED COMMUNITY - BASED CORE PUBLIC HEALTH

A COOPERATIVE EFFORT OF WOODFORD COUNTY HEALTH DEPARTMENT AND PUBLIC HEALTH NURSING BRANCH DIVISION OF LOCAL HEALTH DEPARTMENT OPERATIONS DEPARTMENT FOR PUBLIC HEALTH

OCTOBER 1998

Deborah Acker, RN Public Health Director Woodford County Health Department Versailles, Kentucky 40383 Linda F. Burke, RN, MN Manager, Public Health Nursing Branch Division of Local Health Department Operations Department for Public Health Frankfort, Kentucky 40621

PREFACE

Public Health is changing --- it must change. The challenge is to be in control of the change, instead of being controlled by it.

This is the approach adopted by the Woodford County Health Department when it's Director, Deborah Acker, made the offer to help develop a "TRANSITION MODEL TO POPULATION-FOCUSED COMMUNITY-BASED CORE PUBLIC HEALTH". The following document is the result of that "Pilot Project". It provides an example outline for the process of moving in a smoother transition from primarily clinical services to focusing on the total community's health.

With technical assistance from the Public Health Nursing Branch, Division of Local Health Departments Operations, this independent health department included the implementation phase within the development phase. In order to design a functional approach rather than merely a theoretical framework. It will prove beneficial as time progresses and the health care industry dictates even more change.

CORE Public Health Activities are carried throughout the entire CORE Public Health Functions Planning Process which culminates in an one-page Local Health Department Staff Assignment Sheet. In this manner two major accomplishments are achieved. Each component of Core Public Health Activities can be designated as an individual assignment in each of the 120 counties throughout Kentucky. Completing the process for each respective community makes it possible to add up all of CORE Public Health, statewide.

Envisioned as a "Round Table" of all disciplines within each local health department, this "tool" promotes a process which looks at the role of the health department in providing CORE Public Health within each community. The multi-disciplinary team is essential for successful implementation.

The "Transition Model" builds on and augments any community assessment already in place. It emphasizes "community as client" with community need and available resources driving the process.

Instructions are "Simply perform the process". Start on page 1 and continue through page 90, over some point in time. The first 3 functions: Assessment, Health Policy Development and Assurance can be completed within one week of daily sessions if all disciplines of the health department are available at the "Table" for input/comment. Most of the necessary information will be known by various members of the team. Any information not accessible within the local team warrants contact with the Public Health Nursing Branch or specific professional expert consultants listed as resources or contacts. Subsequent CORE Public Health Functions: Evaluation, Quality Assurance, Competency/Training and New Insights/Innovations should follow in a timely manner, dictated by the specific activity, its Assessment, the Health Policy developed and the Assurance planned to address it.

The "Pilot Project" now adds to the possibility of a more streamlined "planning process", aggregating data and assisting in establishing the need for and cost of CORE Public Health throughout the state. The "TRANSITION MODEL TO POPULATION-FOCUSED COMMUNITY-BASED CORE PUBLIC HEALTH" is offered as an instrument to be used in whatever manner is most beneficial to each local health department and community.

ACKNOWLEDGMENT

For their enlightened enthusiasm, relentless persistence, and gracious willingness to carry the task to completion:

WOODFORD COUNTY HEALTH DEPARTMENT

Deborah Acker, RN, Public Health Director
Geri Tincher, Senior Health Educator
Tracey Giles, RN, Senior Community Health Nurse
Timothy Wright, Environmental Health Supervisor
Gail Costa, Secretary
Gayle J. Patterson, Senior Administrative Assistant
Terri Cox, Support Services Coordinator

PUBLIC HEALTH NURSING BRANCH

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INTRODUCTION

2 MAJOR OBJECTIVES OF CORE PUBLIC HEALTH TRANSITION MODEL

- •Workable within Department for Public Health
- •Functional for local health department use

TRANSITION MODEL BASED ON

Nationally recognized CORE Public Health Functions

- 1. Assessment
- 2. Health Policy Development Planning / Mapping
- 3. Assurance

Consideration of Essential Public Health Services

- Monitor health status to identify community problems.
- 2. Diagnose and investigate community health problems/hazards.
- 3. Inform, educate, empower people about health issues.
- 4. Mobilize community partnerships and action to identify/solve health problems.
- 5. Develop policies and plans that support individual/community health efforts.
- 6. Enforce laws and regulations that protect health and ensure safety.
- 7. Link people to needed personal health services and assure provision of health care when otherwise unavailable.
- 8. Assure a competent public health and personal health care workforce.
- 9. Evaluate effectiveness, accessibility, quality of personal and population-based health services.
- 10. Research for new insights and innovative solutions to health problems.

Utilization of CORE Public Health Activities

- 1. Enforcement of Public Health Regulations
- 2. Surveillance
- 3. Communicable Disease Control
- 4. Public Health Education
- 5. Health Policy
- 6. Risk Reduction (Families and Children)
- 7. Disaster Preparedness

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CORE PUBLIC HEALTH FUNCTIONS

- I. ASSESSMENT
- II. HEALTH POLICY DEVELOPMENT
- III. ASSURANCE
- IV. EVALUATION
- V. QUALITY ASSURANCE
 - COMPETENCY / TRAINING
 - **NEW INSIGHTS / INNOVATIONS**

CORE PUBLIC HEALTH ACTIVITIES

- A. ENFORCEMENT OF PUBLIC HEALTH REGULATIONS
- B. SURVEILLANCE OF PUBLIC HEALTH
- C. COMMUNICABLE DISEASE CONTROL
- D. PUBLIC HEALTH EDUCATION
- E. PUBLIC HEALTH POLICY
- F. FAMILIES AND CHILDREN RISK REDUCTION
- G. DISASTER PREPAREDNESS

Transition Model

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CORE PUBLIC HEALTH ACTIVITIES

- Apply more specifically to operation of health departments in Kentucky
- •Reflect the goals and strategies of the Kentucky Public Health Improvement Plan

THE PROCESS

- •There is <u>NO</u> right or wrong.
- •This is only one (1) way one of many.
- •This one has been chosen because of its <u>direct</u> and <u>simple</u> application to <u>day to day</u> activities of the local public health departments.
- •There is accountability to an outcome.
- •There is accountability of health department resources to achieve that outcome.
- •The degree to which this process can be executed within a given community is determined by the availability of resources, either fiscal or personnel, of the health department
- •This process applies all seven of the CORE Public Health Activities to each of the CORE Public Health Functions.
- •The final step of this process is <u>one page</u> for local staff <u>assignment</u> of their population-focused job.
- •This final step of the process is the <u>most essential</u> in that it enables each local health department to transition to population focused health care through a concrete <u>planned approach</u> more likely to be sustained.

Transition Model 10/98

POPULATION-FOCUSED COMMUNITY BASED CORE PUBLIC HEALTH

F U N C T I O N S

		CORE HEALTH	I ASSESSMENT	II HEALTH POLICY DEVELOPMENT	III ASSURANCE	IV EVALUATION	V QUALITY ASSURANCE	VI COMPETENCY / TRAINING	VII INSIGHTS / INNOVATIONS
		ENFORCEMENT OF PUBLIC HEALTH REGULATIONS							
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	_ 	COMMUNICABLE DISEASE CONTROL							
	>	PUBLIC HEALTH EDUCATION							
	A C T	PUBLIC HEALTH POLICY							
	1	RISK REDUCTION (FAMILIES AND CHILDREN)							
		DISASTER PREPAREDNESS G							40/06

Transition Model

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POPULATION BASED ASSIGNMENT SHEET

Page ____ of ____

CORE PUBLIC		HEALTH POLICY	
HEALTH ACTIVITY	ASSESSMENT	DEVELOPMENT / PLANNING (MAPPING)	ASSURANCE
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ASSURANCE CONTINUUM

EVALUATION	QUALITY ASSURANCE	COMPETENCIES/ TRAINING	NEW INSIGHTS/ INNOVATION
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POPULATION BASED ASSIGNMENT SHEET

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